	SUPPLY	OFFICER A	APPOINTMENT/REVA	LIDATION		
1. LAST NAME	- FIRST NAME - MIDDLE INITIAL:				DATE: (DD MMM YYYY)	
2. GRADE	2. GRADE		3. CAPSN		4. CHARTER NO:	
5. A	ANNUAL REVALIDATION	N OF UNIT SU	IPPLY OFFICER			
of th			that to the best of my knowledge an accordance with CAPM 67-1 and Col			
→	Supply Officers Signature:					
11						
	City: State:		zip			
	Home Telephone:					
∣∟						
6. C	CHANGE OF UNIT SUPP	LY OFFICER	APPOINTMENT			
"We pos			y certify that to the best of my know unted for in accordance with CAPM 6			
	OUTGOING Supply Officers	Signature:				
	Date of	Signature:			_	
→	INCOMING Supply Officers	Signature:				
11	Date of	Signature:				
	Hom	ne Address:				
		City:				
			State: ZIP			
	Work	Telephone:				
	Home	Telephone:				
T CHARTER NO.	CHARTER NO. 8. SIGNATURE OF REQUEST		9. TYPED NAME, GRADE, AND TITLE OF REQUESTER			
PPROVED	ROVED 11. SIGNATURE OF FLIGHT/S		12. FLIGHT OR SQUADRON	13. /	ACTIONS NUMBER & DATE	
es & Adjust	ments:					